

Butler Township
290 South Duffy Road
Butler, PA 16001
724/287-7465
Fax: 724/282-2142

NONRESIDENTIAL BUILDING PERMIT APPLICATION

Name of Applicant

Name of Owner

Street Address

Street Address

City, State, Zip Code

City, State, Zip Code

Phone

Fax

Phone

Fax

Name of Contractor/Company

Name of Design Professional

Street Address

Street Address

City, State, Zip Code

City, State, Zip Code

Phone

Fax

Phone

Fax

Location of Property (Including lot #, plan, and street name) _____

Description of Construction Activity _____

Type of Permit requested (Check all that apply): Building Electrical Fire Protection/Fire
 Mechanical Plumbing Demolition Other _____

Check One of the Following: New Non Residential Structure Interior Buildout of new space
 Interior Alterations of existing tenant space Footer/Foundation Only Other _____

Special Inspections Required ~ Check all that apply: Soils Concrete Welding Boiler
 Fire Special Bolt Tightening EIFS Elevator Misc. _____

Estimated Cost of Construction _____

Is Worker's Compensation Certificate provided with this Application? Yes No

Is Applicant Exempt (Notarized statement required)? Yes No

***If work is related to a Change of Use (i.e. office to restaurant), a letter of approval from the Butler Area Sewer Authority is required.**

I hereby acknowledge that the information contained herein is true and correct, and I hereby agree to comply with all applicable provisions of Butler Township's Codified Ordinance.

Signature of Applicant

Date of Application

Print Name

E-mail

Butler Township
290 South Duffy Road
Butler, PA 16001
724/287-7465



Commercial Construction Document Review Application

Performed By:

Professional Code Services
4035 Gibsonia Road
Gibsonia, PA 15044

Phone: 724/449-2633

Fax: 724/449-2673

www.pcs-codes.com

Section I General Information

(Please Print clearly)

Location of Structure: _____

Applicant Name: _____ Architect: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

E-Mail: _____ E-mail: _____

Section II Structure Information

Use Group Classification: _____ If Mixed Use, describe each use by floor or by

square footage of space: _____

Proposed Work: _____

Construction Type: _____ Height: _____ Stories: _____

Total square footage (building footprint): _____

Occupant Load per floor: _____

Occupant Load per Assembly Room(s): _____

Section III Hazardous Materials

Are any hazardous materials stored or used in a production process within this structure: Yes No
If you answered NO, skip to Section IV.

If you answered Yes, list chemical makeup and the amount: _____

* Material Safety Data Sheets (MSDS) shall be submitted with the construction documents. The amount of each material and the location of the room or space in which the material is to be used or stored must be clearly indicated.

Section IV Fire Protection

Yes No Is this structure protected throughout with an automatic sprinkler system? If yes, signed and sealed sprinkler drawings (1 set) shall be submitted with the application.

Yes No Is this structure protected throughout with a Fire Alarm system? If yes, signed and sealed Alarm drawings (1set) shall be submitted with the application.

The information contained in this application is true and accurate to the extent of my knowledge. The attached document review instructions have been read and are understood. **Applicant agrees to pay all document review fees prior to the issuance of Permit.**

Applicant Signature: _____ Date: _____

Date Township Received _____ By _____

Date Applicant/Owner Contacted of Completed Review _____ By _____

**Butler Township
Construction Document Review
Initial Submittal Instructions**

- Two** complete sets of construction documents shall be submitted with the application (including all Specifications Manuals & Structural Calculations).
- All construction document shall be signed and sealed by a PA registered design professional.
- A Site Plan shall be submitted with the construction drawings.
- One set of signed and sealed Sprinkler drawings (if applicable)in accordance with NFPA 13 shall be submitted.
- One set of signed and sealed Fire Alarm drawings (if applicable) in accordance with NFPA 72 shall be submitted.
- The application has been completed and signed.
- The instructions page (this sheet) has been read and signed.

General Instructions

Upon receipt of a completed application and the required construction drawings, a code review in accordance with the adopted model Building Code will be performed by a Certified Plans Examiner. Reviews are conducted in the order they are received. A detailed list of comments (if applicable) will be forwarded to the applicant. The submitted construction drawings will be retained by **PCS**. Three (3) sets of revised construction documents (if required) as well as a corresponding response to the comments shall be submitted for a re-review. The construction drawings will only be stamped “Approved” when all code violations are corrected.

Note: The review fee includes an initial review and (1) re-review of the revised drawings. A fee in the amount of 50% of the original fee will be charged if a Third review is required. The “Approved” construction documents will not be released for permitting until all invoices are paid in full.

Applicant Signature: _____

Print Name: _____ Date _____

Professional Code Services, Inc.

PLAN REVIEW FEES

The following rates for Plan Review include all model building code disciplines. The plan review fees will be billed to the applicant identified in Section I of the application. All fees paid for a construction document review are non-refundable.

All reviews are conducted in the order in which they are received. A review will not be performed until the all of the required information is submitted. All initial reviews will be completed within 20 business days from receipt of the completed application and materials.

Compliance with the International Building Code

New Construction and/or Additions Complete Code Review ^{1,2}

Use Groups “B”, “E”, “M”, “R-1”, “R-2” “R-3”	\$.13 /square foot (up to 15,000 s.f.)
Plus	\$.08 /square foot (15,001 s.f. up to Total s.f.)
Use Groups “A”, “H”, & “I”.....	\$.15 /square foot (up to 12,000 s.f.)
Plus	\$.10 /square foot (12,001 s.f. up to Total s.f.)
Use Groups “F”, “S”, “U”.....	\$.10 /square foot (up to 12,000)
Plus.....	\$.07 /square foot (12,001s.f. up to Total s.f.)

Single Family Dwelling/Townhouse (IRC).....\$ 175.00 / per unit

¹ Renovations or Alterations to existing structures based on 75% of New Construction Cost.

² Review fees reflect an initial review & review of one subsequent revision. Any additional required reviews will be conducted at 50% of the original review cost.

Miscellaneous	
Minor commercial & residential alterations \leq 1000 S.F.	\$125.00 per hour
Stand alone Mechanical, Electrical, Plumbing & Fire Protection	\$125.00 per hour
Preliminary Review (Height & Area & Type of Construction)	\$125.00 per hour

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- “A” Assembly Use Groups. This includes assembly occupancies. This is further designated as particular use groups including: A-1 Theaters and rooms with stages; A-2 dance halls & nightclubs where alcohol is served; A-3 restaurants and lecture halls where alcohol is not predominately served; A-4 place of worship
 - “B” Business use. This includes office buildings, outpatient medical facilities, dry cleaning, professional business etc.
 - “E” Education Use. Building where education is provided including schools, certain daycares & vocational training.
 - “F” Factory Use. Buildings where production occurs.
 - “H” Hazardous Use. Buildings where hazardous materials are manufactured stored or used in production.
 - “I” Institutional Uses. Includes hospitals, rehab facilities, prisons etc.
 - “M” Mercantile Uses. This includes buildings where the display of goods are sold.
 - “R” Residential Uses. This includes building where persons reside and sleep. Further designated as: R-1 hotels/motels; R-2 non-transient occupants i.e. dormitories, boarding houses; R-3 are multi-family residences; R-4 single family and townhouses.
 - “S” Storage Buildings
 - “U” Utility buildings. This includes accessory structures, garages, barns

Butler Township Workers' Compensation Information

If the homeowner is the contractor, please complete the following and stop at the dotted line.

I, _____, am the homeowner and am "Exempt from
(Print Name)

Workers' Compensation.

Homeowner's Signature

Date

If the homeowner is not the contractor for the building permit, the contractor in compliance with Act 44 of 1993, hereby submits the following information. Please check one of the following:

A current *Certificate of Insurance* showing proof of Workers' Compensation is attached to this form. The certificate must indicate **Butler Township** as the certificate holder. **Signature required below, but does not need notarized.**

The building permit contractor qualifies as "Exempt from Workers' Compensation". Please indicate the reason for the exemption by shading in one of the following. **Complete the box below and get notarized.**

- Contractor is a Sole Proprietor without employees.
- All of the contractor's employees on the project are exempt on religious grounds under Section 304.2 of the Act. Explain in detail: attach as necessary.

- Contractor is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Act. Explain the status of any/or all workers on the project: attach as necessary.

Name of Contractor / Company: _____

Address: _____

City _____ State _____ Zip Code _____

1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

Contractor Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Signature of Notary Public

My Commission Expires

PROPERTY OWNER AUTHORIZATION

I, _____, do hereby authorize
Property Owner's Name Printed

_____ to act on my behalf in
Acting Agent's Name Printed

applying for a Building Permit for the following work:

to be performed at _____
Address where construction will occur

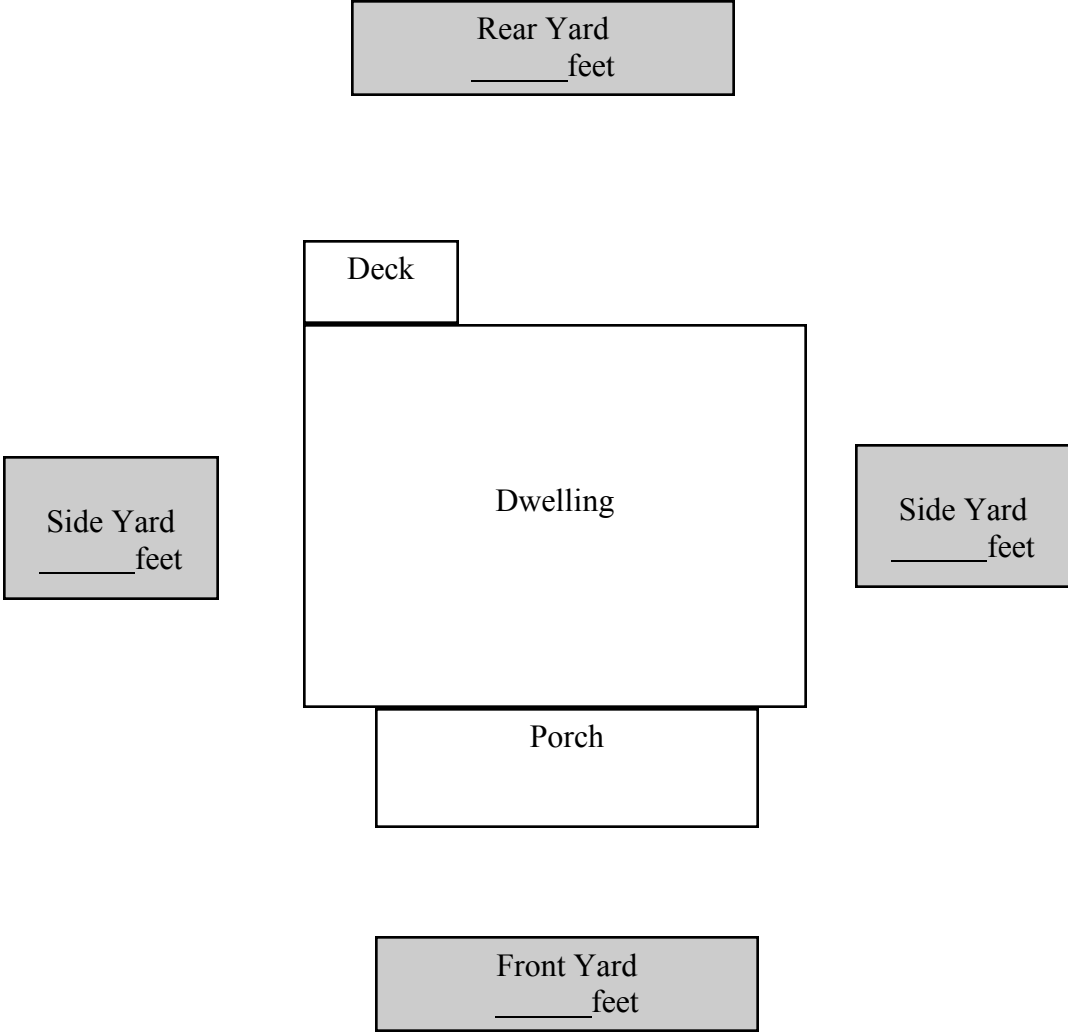
Property Owner's Signature

Property Owner's Street Address

Property Owner's City, State, Zip Code

Date

**SAMPLE SHOWING
PLOT PLAN**



Right -of-Way

Cartway or Road

Right -of-Way